

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	5/14
FORMALITY REVIEW	W	1019	06-16-01
RESPONSE FORMALITY REVIEW	TAP	1100	10-11-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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H.S.  
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 10-29-01

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
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N ..... Non-elected  
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